

FILED AM 8:57
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case:

Debtor 1 David Glen Thompson
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....

\$ 15,000 -

1b. Copy line 62, Total personal property, from Schedule A/B.....

\$ 56,399.⁹⁷

1c. Copy line 63, Total of all property on Schedule A/B.....

\$ 71,399.²⁷

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....

\$ 165,911.³³

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....

\$ 0

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....

+ \$ 0

Your total liabilities

\$ 165,911.³³

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....

\$ 0

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$ -702 -

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☐ Yes

7. What kind of debt do you have?

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ _____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F.**Total claim****From Part 4 on Schedule E/F, copy the following:**

- 9a. Domestic support obligations (Copy line 6a.) \$ _____
- 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ _____
- 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ _____
- 9d. Student loans. (Copy line 6f.) \$ _____
- 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ _____
- 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ _____
- 9g. **Total.** Add lines 9a through 9f. \$ _____

FILED AM 8:51
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case and this filing:

Debtor 1 David Glen Thompson
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Michigan

Case number _____

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1. 220 Pearl Street
Street address, if available, or other description

Cadillac Michigan 49601
City State ZIP Code

Wexford
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 71,100.00
 Current value of the portion you own? \$ 15,000

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: 83-10-076-CO-058-00

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____
 Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

Debtor 1

First Name Middle Name Last Name

Case number (if known) _____

1.3.

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

\$ 15,000

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make: Dodge
 Model: Ram 1500
 Year: 2003
 Approximate mileage: 150,000
 Other information:

in Trust

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 3756⁰⁰ \$ 100% equitable use

☐ Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

Debtor 1

First Name Middle Name Last Name

Case number (if known)

3.3. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

3.4. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No
☐ Yes

4.1. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

4.2. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known)

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No☒ Yes. Describe..... Appliances / Furniture\$ 400.⁰⁰**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No☒ Yes. Describe..... Television / Computer / phone\$ 300.⁰⁰**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No☒ Yes. Describe..... Books\$ 150.⁰⁰**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No☒ Yes. Describe..... Mountain bike / Pool table\$ 600.⁰⁰**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No☐ Yes. Describe.....

\$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No☒ Yes. Describe..... Everyday clothes shoes Boots\$ 200.⁰⁰**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No☒ Yes. Describe..... Silver necklace\$ 50.⁰⁰**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☐ No☒ Yes. Describe..... 2 dogs 1 Cat\$ 125.⁰⁰**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here\$ 1825.⁰⁰

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes Cash: \$ 20.⁰⁰

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes

Institution name:

17.1. Checking account:	<u>North Carolina State Employees Credit Union</u>	\$ <u>740.⁰⁰</u>
17.2. Checking account:	<u>Fifth Third</u>	\$ <u>5.⁰⁰</u>
17.3. Savings account:	<u>North Carolina State Employees Credit Union</u>	\$ <u>25.⁶²</u>
17.4. Savings account:	<u>North Carolina State Employees Credit Union</u>	\$ <u>25.⁷⁶</u>
17.5. Certificates of deposit:	_____	\$ _____
17.6. Other financial account:	<u>US Bank</u>	\$ <u>UNKNOWN</u>
17.7. Other financial account:	<u>North Carolina State employees credit union</u>	\$ <u>200.⁰⁰</u>
17.8. Other financial account:	<u>North Carolina State Employees Credit Union</u>	\$ <u>-500.⁰⁰</u>
17.9. Other financial account:	_____	\$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No☐ Yes

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No

☒ Yes. Give specific information about them.....

Name of entity:

Delta Tango LLC

% of ownership:

0% %

0% %

0% %

\$ 0

\$ _____

\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☐ No☒ Yes. Give specific information about them.....

Issuer name:

State of California
United States

unAssessed
\$ Unknown
\$ Unknown
\$

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:

\$ _____

Pension plan:

\$ _____

IRA:

\$ _____

Retirement account:

\$ _____

Keogh:

\$ _____

Additional account:

\$ _____

Additional account:

\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No☒ Yes

Institution name or individual:

Electric:

Consumers\$ 75.00

Gas:

\$ _____

Heating oil:

\$ _____

Security deposit on rental unit:

\$ _____

Prepaid rent:

\$ _____

Telephone:

\$ _____

Water:

\$ _____

Rented furniture:

\$ _____

Other:

Land Contract\$ -54,000.00**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**☒ No☐ Yes

Issuer name and description:

\$ _____

\$ _____

\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

 \$ _____

 \$ _____

 \$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☐ No☒ Yes. Give specific information about them....

Equitable use of Dodge Ram 2003

\$ 37,560⁰⁰

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ No☒ Yes. Give specific information about them....

name change Decree Spr 89363

\$ unknown

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ No☒ Yes. Give specific information about them....

Drivers license Bond

\$ unknown

Money or property owed to you?

Current value of the
 portion you own?
 Do not deduct secured
 claims or exemptions.

28. Tax refunds owed to you

☐ No☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

unclaimed child Tax credits

Federal:

\$ Unknown Value

State:

\$ Unknown value

Local:

\$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ No☒ Yes. Give specific information.....

Arrears Support
 Case# 2024-3559-FH
 21-104-84-DC
 913106133

Alimony:

\$ _____

Maintenance:

\$ _____

Support:

\$ 40,000 +/-

Divorce settlement:

\$ _____

Property settlement:

\$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☐ No☒ Yes. Give specific information.....

V.A. Disability

\$ 2,250 month

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

\$ _____
 \$ _____
 \$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No☒ Yes. Describe each claim.

Subrogation Redemption minor Securities Account

Unassessed
 \$ Unknown
 Value

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☐ No☒ Yes. Describe each claim.

Subrogation right of Creditors

\$ Unknown

35. Any financial assets you did not already list☐ No☒ Yes. Give specific information.

Rent Profits and proceeds in mortgage in new Dec

\$ Unknown

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

Unassessed
 \$ Unknown

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned☐ No☐ Yes. Describe.

\$ _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No☐ Yes. Describe.

\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade☐ No☐ Yes. Describe..... \$ _____**41. Inventory**☐ No☐ Yes. Describe..... \$ _____**42. Interests in partnerships or joint ventures**☐ No

☐ Yes. Describe..... Name of entity: % of ownership: \$ _____

_____ % \$ _____

_____ % \$ _____

43. Customer lists, mailing lists, or other compilations☐ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe..... \$ _____**44. Any business-related property you did not already list**☐ No

☐ Yes. Give specific information \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →\$ 0**Part 6:**

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?☒ No. Go to Part 7.☐ Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals*Examples: Livestock, poultry, farm-raised fish*☐ No☐ Yes..... \$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

48. Crops—either growing or harvested

☐ No☐ Yes. Give specific information.....

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No☐ Yes

\$ _____

50. Farm and fishing supplies, chemicals, and feed

☐ No☐ Yes

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

☐ No☐ Yes. Give specific information.....

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$ _____

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☒ Yes. Give specific information.....

International Bills of Exchange
 held by missouri County prosecutor David Dehoulter
 and Wexford County Treasurer

\$27,000 -
 \$20,000 -
 3808 27

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$50,818 27

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2

\$15,000 -

56. Part 2: Total vehicles, line 5

\$3756.00

57. Part 3: Total personal and household items, line 15

\$1,825.00

58. Part 4: Total financial assets, line 36

\$Unknown UNAssessed

59. Part 5: Total business-related property, line 45

\$ 0

60. Part 6: Total farm- and fishing-related property, line 52

\$ 0

61. Part 7: Total other property not listed, line 54

+\$50,818 27

62. Total personal property. Add lines 56 through 61.

\$71,399 27

Copy personal property total →

+\$71,399 27

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$71,399.27

FILED AM 8:51
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case:

Debtor 1 David Glen Thompson
First Name Middle Name Last NameDebtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)☐ Check if this is an
amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>VA Disability</u> Line from <i>Schedule A/B</i> : _____	\$ <u>2250</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 522(d)(10)</u>
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$214,000?

(Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

FILED AM 8:55
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case:

Debtor 1 David Glen Thompson
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number
(If known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.1	United States	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name Number Street 1500 Pennsylvania Avenue Washington DC 20520 City State ZIP Code	Department of Treasury N.W.	mortgage on home and other property	\$ UNKNOWN UNASSESSED	\$ UNKNOWN UNASSESSED	\$ UNKNOWN UNASSESSED
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 6-22-72			Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Right to offset & discharge Last 4 digits of account number 7748		
2.2	Thompson David Glen	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name Number Street 220 Pearl Street Cadillac Michigan 4960 City State ZIP Code		Home and other rights & property	\$ UNKNOWN UNASSESSED	\$ UNKNOWN UNASSESSED	\$ UNKNOWN UNASSESSED
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 6-22-72			Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Right to offset & discharge Last 4 digits of account number 7748		
Add the dollar value of your entries in Column A on this page. Write that number here:			\$ UNKNOWN		

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:	Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
<p>After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.</p> <p><u>07590 County Friend of</u> Creditor's Name <u>Court CO: 07590 County</u> Court clerk Number Street <u>800 Livingston Blvd 1a</u> <u>Gaylord Michigan 49735</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2017</u></p>	<p>Describe the property that secures the claim: <u>Surety and Judgment Bond</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>2017 016811-UM</u></p>	\$ <u>14,854⁰⁵</u>	\$ <u>unknown</u>	\$ <u>unknown</u>
<p><u>Wexford/Missaukee friend</u> Creditor's Name <u>of Court/CO: Missaukee</u> <u>County clerk</u> Number Street <u>401 N. Lake street #800</u> <u>Cadillac Michigan 49601</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2024</u></p>	<p>Describe the property that secures the claim: <u>Surety + Judgment Bonds</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>2017-016811-UM</u></p>	\$ _____	\$ <u>unknown/unassessed</u>	\$ _____
<p><u>84th District Court</u> Creditor's Name <u>437 East Division St.</u> Number Street <u>Cadillac Michigan 49601</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2022</u></p>	<p>Describe the property that secures the claim: <u>Drivers License/ right to travel</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>24-894-OT-1</u></p>	\$ <u>125.⁰⁰</u>	\$ <u>unknown</u>	\$ <u>unassessed</u>
<p>Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		<p>\$ <u>14,979⁰⁵</u> \$ _____</p>		

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known)

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
if any

United States Department of Defense 1400 Defense Pentagon Washington DC 20301-1400 City State ZIP Code	Describe the property that secures the claim:	\$ Unknown	\$ Unknown	\$ Unknown
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) <u>offset - Discharge</u>				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred		Last 4 digits of account number <u>0009</u>		

United States Department of Education Student loans/Education PO Box 87130 Lincoln Nebraska 68501 City State ZIP Code	Describe the property that secures the claim:	\$ 54,905.28	\$ Unknown	\$ Unknown
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u>				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred <u>1993</u>		Last 4 digits of account number <u>1020026515</u>		

Mike Johnson 1796 East Lake Mitchell Cadillac Michigan 49601 City State ZIP Code	Describe the property that secures the claim:	\$ 54,000	\$ 126,100	\$ Unknown
Land Contract 220 Pearl Street				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred <u>11-2022</u>		Last 4 digits of account number <u>N/A</u>		

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ 166,905.28
 \$

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

<input type="checkbox"/> <u>Sandra Jean Paige</u> Creditor's Name <u>4155 Lachance Rd</u> Number Street <u>Lake City Michigan 49651</u> City State ZIP Code	Describe the property that secures the claim: <u>Bonds performance</u> <u>Surety</u>	\$ <u>Unknown</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred <u>2024/25</u>				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset)				
Last 4 digits of account number <u>Unknown</u>				

<input type="checkbox"/> <u>Mary Alice Jean Brooks</u> Creditor's Name <u>Unknown</u> Number Street City State ZIP Code	Describe the property that secures the claim: <u>Bonds / performance</u>	\$ <u>Unknown</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred <u>2023</u>				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u>				
Last 4 digits of account number <u>22-241-67-2</u>				

<input type="checkbox"/> <u>Clerk of Court 28th Circuit</u> Creditor's Name <u>111 S. Canal Street</u> Number Street <u>Lake City Michigan 49651</u> City State ZIP Code	Describe the property that secures the claim: <u>Bonds performance</u>	\$ <u>27,000</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred <u>10/27/24</u>				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u>				
Last 4 digits of account number <u>24000703</u>				

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ <u>27,000</u>
\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known)

Part 1:	Additional Page	Column A	Column B	Column C	
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any	
<input type="checkbox"/>	<p><u>84th District Court</u> Creditor's Name <u>111 South Canal Street</u> Number Street</p> <p><u>Lake City Michigan 49651</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2024</u></p>	<p>Describe the property that secures the claim: <u>Bonds/securities</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>24-825-FY-2</u></p>	\$ <u>3672-</u> <u>plus</u>	\$ <u>UNKNOWN</u>	
<input type="checkbox"/>	<p><u>46th Circuit Court</u> Creditor's Name <u>225 West Main Street</u> Number Street</p> <p><u>Gaylord Michigan 49735</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2017</u></p>	<p>Describe the property that secures the claim: <u>Bonds securities</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>20170168110M</u></p>	\$ <u>5600</u> <u>plus</u>	\$ <u>UNKNOWN</u>	
<input type="checkbox"/>	<p><u>84th District Court</u> Creditor's Name <u>11 South Canal Street</u> Number Street</p> <p><u>Lake City Michigan 49651</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2021</u></p>	<p>Describe the property that secures the claim: <u>Bond Securities</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u></p> <p>Last 4 digits of account number <u>2021011484 DC</u></p>	\$ <u>2635-</u> <u>plus</u>	\$ <u>UNKNOWN</u>	
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p> <p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		<p>\$ <u>11,907 plus</u></p> <p>\$ _____</p>			

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
If any

<input type="checkbox"/>	<u>46th Circuit Court</u> Creditor's Name <u>225 West Main Street</u> Number Street <u>Gaylord Michigan 49735</u> City State ZIP Code	Describe the property that secures the claim: <u>Bonds/Securities/Warrants</u>	\$ <u>Unknown</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u> <u>17-16811-UM</u>		
Date debt was incurred <u>2017</u>			Last 4 digits of account number _____		

<input type="checkbox"/>	<u>Missaukee Court Friends of Court</u> Creditor's Name <u>401 N. Lake Street</u> Number Street <u>Cadillac Michigan 49604</u> City State ZIP Code	Describe the property that secures the claim: <u>Bonds/Securities</u>	\$ <u>Unknown</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u> <u>913831115</u>		
Date debt was incurred <u>2021</u>			Last 4 digits of account number _____		

<input type="checkbox"/>	<u>88th Circuit Court</u> Creditor's Name <u>111 South Canal Street</u> Number Street <u>Lake City Michigan 49651</u> City State ZIP Code	Describe the property that secures the claim: <u>Bonds/Securities</u>	\$ <u>Unknown</u>	\$ <u>Unknown</u>	\$
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt			Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>offset Discharge</u> <u>2110484-DC</u>		
Date debt was incurred <u>2021</u>			Last 4 digits of account number _____		

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ Unknown

\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
if any

☐ 28th Circuit Court
 Creditor's Name
111 South Canal Street
 Number Street

Describe the property that secures the claim:

\$ UNKNOWN\$ UNKNOWN

\$

Bonds / Securities

Lake City Michigan 49651
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a
community debt

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured
car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☒ Other (including a right to offset) offset Discharge

Date debt was incurred 2022Last 4 digits of account number 22-16672 PD

☐ 84th District Court
 Creditor's Name
111 South Canal Street
 Number Street

Describe the property that secures the claim:

\$ UNKNOWN\$ UNKNOWN

\$

Bonds / Securities

Lake City Michigan 49651
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a
community debt

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured
car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☒ Other (including a right to offset) offset Discharge

Date debt was incurred 2024Last 4 digits of account number 24-825 FY

☐ 28th Circuit Court
 Creditor's Name
111 South Canal Street
 Number Street

Describe the property that secures the claim:

\$ UNKNOWN\$ UNKNOWN

\$

Bonds Securities

Lake City Michigan 49651
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a
community debt

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured
car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☒ Other (including a right to offset) offset Discharge

Date debt was incurred 2021Last 4 digits of account number 2021-010484-DC

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ UNKNOWN

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
If any

☐ 28th Circuit Court
 Creditor's Name
111 South Canal Street
 Number Street

Describe the property that secures the claim:

\$ UNKNOWN \$ UNKNOWN \$ _____

Bonds/Securities

Lake City Michigan
 City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☒ Other (including a right to offset) offset Discharge

☐ Check if this claim relates to a community debt

Date debt was incurred 2025Last 4 digits of account number 25-3579 FH

☐ 84th District Court
 Creditor's Name
111 South Canal Street
 Number Street

Describe the property that secures the claim:

\$ UNKNOWN \$ UNKNOWN \$ _____

Bonds/Securities

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☒ Other (including a right to offset) offset Discharge

☐ Check if this claim relates to a community debt

Date debt was incurred 2023Last 4 digits of account number 23-232-SP-2

☐ Cabotage Emergency Group
 Creditor's Name
PO Box 650763
 Number Street

Describe the property that secures the claim:

\$ 1487 \$ UNKNOWN \$ _____

Bonds

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset) medical offset Discharge

☒ Check if this claim relates to a community debt

Date debt was incurred 11/24Last 4 digits of account number 29X104218630

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 1487

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

☐ MUNSON HealthCare

Creditor's Name

400 Habant Street

Number

Street

Adrian Michigan

City

State

ZIP Code

Describe the property that secures the claim:

Bonds Securities

\$ 1633

\$ UNKNOWN

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset) medical offset Discharge

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred 11/24Last 4 digits of account number 00829801

☐

Creditor's Name

Number

Street

City

State

ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

☐

Creditor's Name

Number

Street

City

State

ZIP Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 1633 plus

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ 165,911.33

Debtor 1 David Colen Thompson
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Mich. ga.

Case number _____
(If known)

MM / DD / YYYY

page 1

Debtor 1

First Name Middle Name Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ _____	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____
5e. Insurance	5e. \$ _____	\$ _____
5f. Domestic support obligations	5f. \$ <u>1500.00</u>	\$ _____
5g. Union dues	5g. \$ _____	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ _____	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ _____	\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____
8b. Interest and dividends	8b. \$ _____	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____
8d. Unemployment compensation	8d. \$ _____	\$ _____
8e. Social Security	8e. \$ _____	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ _____	\$ _____
8g. Pension or retirement income	8g. \$ _____	\$ _____
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ _____	\$ _____
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ _____ + \$ _____ = \$ _____	\$ _____
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$ _____
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies		12. \$ <u>2250.00</u> Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: <u>Reopened Disability claim VA</u>		

FILED AMB:48
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case:

Debtor 1 David Glen Thompson
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Michigan

Case number
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter6

☒ No

☐ Yes

Daughter6

☒ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 500⁰⁰

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$ 3700⁰⁰ yr

4b. \$

4c. \$

4d. \$

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

Your expenses

5. **Additional mortgage payments for your residence, such as home equity loans** 5. \$ _____
6. **Utilities:**
- 6a. Electricity, heat, natural gas 6a. \$ 200⁰⁰
- 6b. Water, sewer, garbage collection 6b. \$ 50⁰⁰
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 72⁰⁰
- 6d. Other. Specify: _____ 6d. \$ _____
7. **Food and housekeeping supplies** 7. \$ 400⁰⁰
8. **Childcare and children's education costs** 8. \$ _____
9. **Clothing, laundry, and dry cleaning** 9. \$ _____
10. **Personal care products and services** 10. \$ _____
11. **Medical and dental expenses** 11. \$ _____
12. **Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ _____
13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$ _____
14. **Charitable contributions and religious donations** 14. \$ _____
15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \$ _____
- 15b. Health insurance 15b. \$ _____
- 15c. Vehicle insurance 15c. \$ 120⁰⁰
- 15d. Other insurance. Specify: _____ 15d. \$ _____
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ _____
17. **Installment or lease payments:**
- 17a. Car payments for Vehicle 1 17a. \$ _____
- 17b. Car payments for Vehicle 2 17b. \$ _____
- 17c. Other. Specify: _____ 17c. \$ _____
- 17d. Other. Specify: _____ 17d. \$ _____
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$ _____
19. **Other payments you make to support others who do not live with you.**
Specify: child support 19. \$ 1600⁰⁰ mo
20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
- 20a. Mortgages on other property 20a. \$ _____
- 20b. Real estate taxes 20b. \$ _____
- 20c. Property, homeowner's, or renter's insurance 20c. \$ _____
- 20d. Maintenance, repair, and upkeep expenses 20d. \$ _____
- 20e. Homeowner's association or condominium dues 20e. \$ _____

Debtor 1

David Glen Thompson
 First Name Middle Name Last Name

Case number (if known) _____

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 2952⁰⁰ 4-

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ ~~29~~ 0

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 2952⁰⁰

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 2250⁰⁰

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 2952⁰⁰

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 1 ~~48~~ -702⁰⁰

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes.

Explain here:

FILED AMB:47
2025 APR 7MICHELLE M. WILSON
CLERK, USBC MIW

Fill in this information to identify your case:

Debtor 1 David Glen Thompson
First Name Middle Name Last NameDebtor 2
(Spouse, if filing) First Name Middle Name Last NameUnited States Bankruptcy Court for the: Western District of MichgCase number
(If known)☐ Check if this is an
amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and
Signature (Official Form 119).Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and
that they are true and correct.x [Signature]
Signature of Debtor 1x _____
Signature of Debtor 2Date 4 3 2025
MM / DD / YYYYDate _____
MM / DD / YYYY